Approved for use through 7/31/2005 OMB 0851-0032
U.S. Patent and Trademer's Office; U.S. DEPARTMENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004												^^	10-650148		
	. APPLICATION AS FILED - PART I (Cotumn 1) (Cotumn 2)								SMALL ENTITY				_	IER THAN LL ENTITY	
L	FOR		NUMBERFLED			NUMBER EXTRA			RATE	\$)	FEE (S)	7	RATE (S)	FEE (1)	
	iasic fee Dicer 1 15(0), (b)	, or (x))		NA			N/A		NA		150.00		NIA	300.00	
SEARCH FEE (37 CFR 1 18(1), (4, or (#))			NA			NIA			AUA		\$250	7	NIA	\$500	
L	EXAMINATION FEE D7 CFR 1 18(al. (7), or (9))		NA			NIA :			, N/A		\$100	7	. NA	\$200	
C	OTAL CLAIMS 7 CFR 1 16(1)		- 26 minus 20 •						X\$ 25	•		7.	X\$50		
INDEPENDENT CLAIMS (37 OFR 1 16(1))			4 mnus = -					brack	X100	$\cdot$		7	X200	•	
FI	PPLICATION SIZE TOPR 1 16(4)	Œ	If the specification and c sheets of paper, the app is \$250.(\$125 for small c additional 50 sheets or f 35 U.S.C. 41(a)(1)(6) ar			plication size fee due entity) for each fraction thereof. See		ı	-			1			
MULTIPLE DEPENDENT CLASH PRESENT OF CFR 1 16(0)								+180=	1		1	+360=			
° If the difference in column 1 is loss than zero, enter "O" in column 2.									TOTAL	T		]	TOTAL	A 150 1	
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(Column 1) (Column 2) (Column 3)									. SMALL ENTITY				_	R THAN ENTITY	
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ä	tridependent (27 CFR 1.18ps)	<u> </u>	4	Minus	·- (	1	٥	]	X100 .	T		OR	X200		
₹	Application.St	to Fee (37	(37 CFR 1.16(s))							I					
	FIRST PRESEN	TATION OF	MULTIPLE	DEPEND	ENT CLAIM	LAIM (37 CFR 1,18())			+180=		1.	OR	+360≈	: 7	
									TOTAL ADD'L FEE	L		OR	TOTAL ADD'L FEE		
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₹I	AT CFR L 18(0)	· 24		Minus	<u>.</u> 32	0	s / .		X\$ 25 .	Ι.		OR	X\$50 -		
Ž	(DF CFR L18D))	• . (	P	Minus	· <del>·</del> (	F	• /		X100 .	Γ	7-1	OR ·	X200 .		
≨l	Application Size	Fee (37 C	FR 1.16(	(F))											
1	FIRST PRESENTATION OF MARTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))									L		OR	+360=		
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fits (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments in the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS UDDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 65014

Effective January 1, 2003 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY **TOTAL CLAIMS** 20 RATE FEE RATE FEE **FOR** NUMBER FILED NUMBER EXTRA BASIC FEE 375.00 BASIC FEE 750.00 OR TOTAL CHARGEABLE CLAIMS 20 Ð minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 =X42 =X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL 834 CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT **AMENDMENT AFTER PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE Total . Minus X\$ 9= X\$18= OR Independent Minus \*\*\* X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST œ ADDI-REMAINING ADDI-NUMBER PRESENT AMENDMENT **AFTER PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus \*\* X\$ 9= X\$18= OR Independent Minus X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER ADDI-ADDI-PRESENT ENDMENT AFTER **PREVIOUSLY** RATE TIONAL **EXTRA** RATE TIONAL **AMENDMENT** PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR independent Minus = X42= X84= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +140=

OR

OR

TOTAL

ADDIT. FEE

+280=

ADDIT, FEE

TOTAL

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Pald For" (Total or Independent) is the highest number found in the appropriate box in column 1.